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CONFIRMATION NO. 1871

<b>SERIAL NUMBER</b> 10/538,252	<b>FILING OR 371(c) DATE</b> 06/09/2005 <b>RULE</b>	<b>CLASS</b> 548	<b>GROUP ART UNIT</b> 1609	<b>ATTORNEY DOCKET NO.</b> P51399
<b>APPLICANTS</b> Dirk A Heerding, Collegeville, PA; Alan T. Price, Collegeville, PA; Igor Safonov, Collegeville, PA; <i>KH</i>				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US03/39633 12/12/2003 which claims benefit of 60/433,482 12/13/2002 <i>Rst</i>				
<b>** FOREIGN APPLICATIONS *****</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and <i>KH</i> Acknowledged <i>KH</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> PA	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 20
				<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 20462				
<b>TITLE</b> Thrombopoietin mimetics				
<b>FILING FEE RECEIVED</b> 500	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	